

SBA PRE-QUALIFICATION LOAN APPLICATION

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|--|--------|---|-------------------------------------|------------------------------------|------|
| SBA OFFICE USE ONLY: | | DATE RECEIVED: | | CID NUMBER: | |
| Legal Name of Business: | | | Tax ID #: | | |
| Address of Business: | | | | | |
| Business Phone #: | | | Date Business Established: | | |
| Legal Structure: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation | | | | | |
| SIC Code#: | | | Number of Existing Employees: _____ | | |
| Describe History of Business: (If NEW business, submit copy of Business Plan) | | | | | |
| Describe Business Operation: | | | | | |
| Is Business engaged in export trade? Yes <input type="checkbox"/> No <input type="checkbox"/> Do you intend to begin exporting as a result of this loan? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | |
| * Personal financial statements must be submitted by all owners of 20% or more. | | | | | |
| OWNERS/MANAGEMENT (proprietors, partners and shareholders) | | | | | |
| Name | SS No. | % Owned | Sex | Military Service Y/N: From: To: | Race |
| | | | | | |
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| | | | | | |
| | | | | | |
| TOTAL | | | | | |
| Submit all information in the section below for each principal of the business. Use separate attachments for each principal. | | | | | |
| Date of Birth _____ | | Place of Birth (City, ST or Foreign Country) _____ | | | |
| Social Security # _____ | | U.S. Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/> If No, Alien reg # _____ | | | |
| I. Are you or your business involved in any pending lawsuits? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide the details as Exhibit A. | | | | | |
| II. Do you or your spouse or any member of your household, or anyone who owns, manages or directs your business or their spouses or members of their household work for the Small Business Administration, Small Business Advisory Council, SCORE or ACE, any Federal Agency, or the participating lender? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide the name and address of the person and the office where employed. Label this Exhibit B. | | | | | |
| III. Affiliates: Do you or the applicant business have any interest in any other business as owner, principal, partner or manager? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide details to Lender. | | | | | |
| IV. *Are you: (a) presently under indictment, on parole or probation, Yes* <input type="checkbox"/> No <input type="checkbox"/> or (b) have ever been charged with or arrested for any criminal offense other than a minor motor vehicle violation (including offenses which have been dismissed, discharged, or nolle prosequi) Yes* <input type="checkbox"/> No <input type="checkbox"/> or (c) convicted, placed on pretrial diversion, or placed on any form of probation including adjudication withheld pending probation for any criminal offense other than a minor vehicle violation? Yes* <input type="checkbox"/> No <input type="checkbox"/> (including offenses which have been dismissed, discharge, or nolle prosequi) | | | | | |
| V. *Have any of above individuals, the applicant firm or affiliates (a) been involved in bankruptcy or insolvency proceedings within the last 10 years or (b) have pending personal or business judgments, unsettled lawsuits or major disputes? Yes* <input type="checkbox"/> No <input type="checkbox"/> *If yes, the loan request must be submitted under the regular 7(a) loan program. If you knowingly make a false statement or overvalue a security to obtain a guaranteed loan from SBA you can be fined up to \$10,000 and/or imprisoned for not more than five years under 18 U.S.C. 1001; if submitted to a Federally insured institution, under 18 USC 1014 by Imprisonment of not more than twenty years and/or a fine of not more than \$1,000,000. I authorize SBA's Office of Inspector General to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, as amended. | | | | | |
| Signature _____ | | | Date _____ | | |

| PREVIOUS SBA OR OTHER GOVERNMENT FINANCING (Requested or obtained by principals, applicant firm or affiliates) | | | | | |
|---|-------------------------|--------------------|----------------------------------|-----------------|------------------------|
| Name of Agency | Declined or Approved | Date of Request | \$ Amount | Loan Balance | Current or Past Due |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| CREDIT HISTORY | | | | | |
| Credit Reports Obtained For: | Type of Report | Credit Rating | Comments: | | |
| Applicant | | | | | |
| Principal: | | | | | |
| Principal: | | | | | |
| Principal: | | | | | |
| Other: | | | | | |
| PROPOSED USES AND SOURCES OF FUNDS | | | | | |
| USES | | | SOURCES | | |
| Working Capital | | | SBA/Bank (requested loan amount) | | |
| Inventory | | | Equity/Injection (Note 4) | | |
| Machinery & Equipment | | | | | |
| Furniture & Fixtures | | | Seller Financing | | |
| Real Estate (Note 1) (Purchase, construction, etc.) | | | Other: | | |
| Purchase of Existing Business (Note 2) | | | Other: | | |
| Debt Refinance (Note 3)(include in listing below) | | | Other: | | |
| TOTAL USES: | | | TOTAL SOURCES: | | |
| Proposed SBA/Bank Maturity | | | Proposed SBA/Bank Interest Rate | | |

Note 1. If financing real estate, who or what entity will hold title?: _____
 If other than the applicant firm, list ownership of real estate: _____

Note 2. Business Purchase Price _____ Stock or asset purchase: _____ Why is seller selling? _____

Note 3. If refinancing debts, state benefits to the applicant firm: _____

Note 4. State the source of injection: _____

| BUSINESS INDEBTEDNESS: on all existing business debt, contracts, notes and mortgages payable (Indicate by an (*) items to be paid w/loan proceeds.) | | | | | | | | |
|--|--------------------|--------------------|------------------|---------------------|------------------|--------------------|------------------------|---------------|
| To Whom Payable | Original Amount | Present Balance | Original Date | Rate of Interest | Maturity Date | Monthly Payment | Current or Past Due | Secured by |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Total | | | | | Total | | | |

Financial Statements are: ___ Internal ___ Acct't Compiled ___ Reviewed ___ Audited

| BALANCE SHEET INFORMATION: (Dollars in Thousands) | | Last FYE Date dd/mm/yyyy | Interim Date dd/mm/yyyy | Debit | Credit | Proforma | |
|--|--------------------------------------|-----------------------------|----------------------------|-------------|---------|-----------------|------------|
| ASSETS | | | | | | | |
| | Cash | | | | | | |
| | Accounts Rec. | | | | | | |
| | Inventory | | | | | | |
| | Other | | | | | | |
| TOTAL CURRENT ASSETS | | | | | | | |
| FIXED ASSETS | | | | | | | |
| OTHER ASSETS | | | | | | | |
| | Loans to Owners | | | | | | |
| TOTAL ASSETS | | | | | | | |
| LIABILITIES & NET WORTH: | | | | | | | |
| | Accounts Payable | | | | | | |
| | Notes Payable | | | | | | |
| | Taxes | | | | | | |
| | Other | | | | | | |
| | SBA | | | | | | |
| TOTAL CURRENT LIABILITIES: | | | | | | | |
| | Notes Payable | | | | | | |
| | SBA | | | | | | |
| | Loans From Owners | | | | | | |
| | Other | | | | | | |
| TOTAL LIABILITIES | | | | | | | |
| NET WORTH | | | | | | | |
| TOTAL LIABILITIES & NET WORTH | | | | | | | |
| PROFORMA RATIO INFORMATION | | | | | | | |
| | Applicant | RMA | Ratio | Comments | | | |
| Proforma | Working Capital | | | | | | |
| Proforma | Current Ratio | | | | | | |
| Proforma | Quick Ratio | | | | | | |
| Accounts | Receivable Turnover (in days) | | | | | | |
| Inventory | Turnover (in days) | | | | | | |
| Proforma | Debt to Worth Ratio | | | | | | |
| HISTORICAL & PROJECTED CASHFLOW FOR REPAYMENT INFORMATION | | | | | | | |
| | (Dollars in Thousands) | Prior Fiscal Yr | Prior Fiscal Yr | Most Recent | Interim | RMA SIC Code | Projection |
| a | Revenues | | | | | | |
| b | Gross Profit | | | | | | |
| c | Interest Expense | | | | | | |
| d | Owner's Withdrawal, etc. | | | | | | |
| e | Net Income (Aft'r w/d, d'vd, txs) | | | | | | |
| f | Depreciation | | | | | | |
| g | Cash Flow (c+e+f) | | | | | | |
| h | Rent Expense Saved (if applicable) | | | | | | |
| I | Other Expense Saved (explain) | | | | | | |
| j | Cashflow for Debt Service (g+h+I) | | | | | | |
| k | Existing Debt Service (Prin. & Int.) | | | | | | |
| l | New Debt Service (Prin. & Int.) | | | | | | |
| m | Total Debt Service (k+l) | | | | | | |
| n | Debt Coverage Ratio (j/m) | | | | | | |

Combined Household Income: _____ Number in Household: _____
 Other Sources of Income: _____ Withdrawals: _____

| COLLATERAL SUMMARY | Cost | Market Value | Prior Liens |
|---|-------------|---------------------|--------------------|
| Land and Buildings | | | |
| Machinery & Equipment | | | |
| Furniture and Fixtures | | | |
| Accounts Receivable | | | |
| Inventory | | | |
| Other: | | | |
| Total | | | |
| Evaluation by: | | Date: | |
| Total Cost or Appraised Value | | | |
| Less: Prior Liens | | | |
| = Net Collateral Value | | | |
| COVERAGE RATIO: (net collateral value / loan amount) | | | |

Is firm considered a frequent polluting industry? _____ Yes _____ No

* If yes, Phase I must be completed and submitted in the private sector lender's loan package.

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| OTHER PERTINENT INFORMATION: |
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| MANAGEMENT EXPERIENCE/BACKGROUND (Describe key management/owner's background & business experience) |
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CERTIFICATIONS OF APPLICANT AND INTERMEDIARY

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I agree that if SBA approves this loan application I will not, for at least two years, hire as an employee or consultant anyone that was employed by SBA during the one year period prior to the disbursement of the loan. And I hereby certify that: (1) as consideration for any Management, Technical, and Business Development Assistance that may be provided, I waive all claims against SBA and its consultants, and (2) all information contained in this document and any attachments is true and correct to the best of my knowledge.

IF A PROPRIETOR OR GENERAL PARTNER, SIGN HERE:

By: _____ Title: _____ Date: _____
Address: _____

IF A CORPORATION, SIGN HERE:

Corporate Name: _____

By: _____ Title: _____ Date: _____

Attested by: _____
Signature of Corporate Secretary

INTERMEDIARY:

By: _____ Title: _____ Date: _____